

City of Carpinteria Building & Safety

Authorization Form

State of California Health & Safety Code Section 19825-19829

AUTHORIZATION OF AGENT TO ACT ON PROPERTY OWNER'S BEHALF

To the City of Carpinteria, Building & Safety Division:

Excluding the Notice to the Property Owner, the execution of which I understand is my personal responsibility, I hereby authorize the following person(s) to act as my agent(s) to apply for, sign and file the documents necessary to obtain an Owner-Builder Permit for my project.

Project Location or Address: Scope of Construction Project (or description of work):		
Authorized Agent's Name: Address:		
Phone Number:		
I declare under penalty of perjury above and I personally filled out the		•
Property Owner's Name:		
Property Owner's Signature: Date:		
Note: Per State Law a copy of the verification acceptable to the ager issued to verify the property owner.	ncy is required to be	
City Staff: Verified Photo Identification	Yes Date	Staff Name/Initials: